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1AP6 Rec'd PCT/PTO 23 JUN 2006

**UNITED STATES PATENT APPLICATION TRANSMITTAL FORM**

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Attention: DO/EO/US

Docket No.: WW061USU

Customer No.: 27623

Dear Sir:

Transmitted herewith for filing is the patent application of

Applicant(s): **Anton FRANK, Oliver NÖHL and Harald HOFFELD**

For: **CLOSURE WITH A THERMAL SAFEGUARD  
FUNCTION**

International Application No.: **PCT/EP2004/014190**

International Filing Date: **13 December 2004**

**ENTERING OF U.S. NATIONAL STAGE UNDER 35 U.S.C. §371**

Transmitted herewith for filing are the following documents submitted under 37 C.F.R. §1.495(b) for the purpose of entering the national stage in the United States of America as an elected office. Enclosed are:

XXXX Specification (14 pps.) consisting of: Description (10 pps.); Claims (3 pps.) and Abstract (1 page);

       Declaration and Power of Attorney;

XXXX   1   sheet of drawings;

XXXX Preliminary Amendment;

       An Assignment of the invention to:                                 ,  
including \$40.00 recordation fee and recordation cover sheet;

XXXX Information Disclosure Statement with copies of patent(s) (Form -  
PTO-1449);

       The undersigned attorney has verified that the applicant is entitled  
to a Small Entity Status;

**XXXX** Priority of application Serial No. **103 61 440.0**, filed on **23 December 2003** in **Germany** and **PCT/EP2004/014190**, filed on **13 December 2004** is claimed under 35 U.S.C. §119 and 35 U.S.C. §365;

**XXXX** Cover page of published PCT Publication No. **WO 2005/064178**;

**XXXX** Copy of International Preliminary Examination dated **September 10, 2005**;

\_\_\_\_\_ Copy of PCT Demand Under Article 31; and

**XXXX** Copy of International Search Report dated **April 13, 2005**

\_\_\_\_\_ Copy of Written Opinion.

\_\_\_\_\_ Amendments to the claims of the International Application under PCT Article 19 (35 U.S.C. 371(c)(3)) are transmitted herewith.

The Filing Fee is calculated below.

CLAIMS AS FILED				
(1) For	(2) Number Filed	(3) Number Extra	(4) Rate	(5) Basic Fee \$300.00
Total Claims	20 - 20 =	0	x \$50.00	\$
Independent Claims	3 - 3 =	0	x \$200.00	\$
Multiple Dependent Claim Fee		x \$360.00 = \$0.00		
<b>SEARCH FEE</b>		<b>\$500.00</b>		
<b>EXAMINATION FEE</b>		<b>\$200.00</b>		
<b>NATIONAL STAGE APPLICATION SIZE FEE (\$250 FOR EACH ADDITIONAL 50 SHEETS OVER 100 SHEETS)</b>		<b>\$</b>		
<b>TOTAL FILING FEE</b>		<b>\$1000.00</b>		
<b>1/2 FILING FEE FOR SMALL ENTITY</b>		<b>\$</b>		

**XXX** Firm's check in the amount of **\$1000.00** to cover the filing fee;

**XXX** The Commissioner is hereby authorized to charge any additional fees under 37 C.F.R. 1.16 and 1.17 which may be required with this communication or during the entire pendency of the application, or credit any overpayment, to **Deposit Account No. 01-0467**. A duplicate copy of this Form is enclosed.

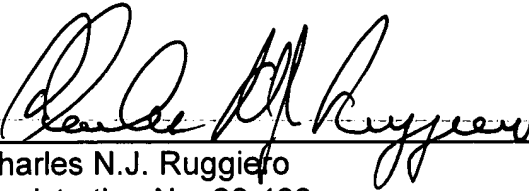
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Dated: June 23, 2006



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**CERTIFICATE OF EXPRESS MAILING**

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